

RI Health Professional Loan Repayment Program Application FAQ

Do I qualify for the RI Health Professional Loan Repayment Program?

Yes, you qualify if you are:

- A United States citizen (U.S. born or naturalized)
- A fully trained and licensed health professional able to practice in Rhode Island in one of the following eligible disciplines:
 - Primary Care
 - Dental Health
 - Mental/ Behavioral Health
- A health professional providing ambulatory outpatient health care services in a public or nonprofit private entity located in a current federally designated HPSA appropriate for your discipline
- A health professional with qualified student loan debt for education that led to your degree
- Do not have an outstanding contractual obligation for health professional service to the federal government, a State, or other entity, unless that service obligation will be completely satisfied before September 1st in the year applying to the program
- Free from judgments arising from federal debt.
- Willing to commit to a 2-year service obligation at an <u>HPLRP-approved site</u>.

Please see the <u>Rhode Island Health Professional Loan Repayment Program (HPLRP Eligibility</u> <u>and Requirements</u> for a detailed list of requirements and terms of service.

NOTE: The initial service requirement for all HPLRP participants is two years. Applicants must work a minimum of 20 hours per week and 80% of their time must be devoted to direct patient care. HPLRP participants currently under a service contract must complete their service obligation as outlined in their service agreement before reapplying. Please see the Understanding the Service Obligation section in the Rhode Island Health Professional Loan Repayment Program (HPLRP) Eligibility and Requirements for more details.

Which disciplines and specialties are eligible?

HPLRP participants must have completed training in an accredited graduate training program and possess an active and valid license (without restrictions or encumbrances) to practice in one of the following eligible disciplines:

Approved Disciplines:

- MD: Allopathic Medicine
- DO: Osteopathic Medicine
- DDS/DMD: General and Pediatric Dentistry
- NP: Nurse Practitioner
- CNM: Certified Nurse-Midwife
- PA: Physician Assistant
- RDH: Registered Dental Hygienist
- HSP: Health Service Psychologist (Clinical and Counseling)
- LCSW: Licensed Clinical Social Worker
- PNS: Psychiatric Nurse Specialist
- LPC: Licensed Professional Counselor
- MFT: Marriage and Family Therapist
- Master's Level Alcohol and Substance Abuse Counselors
- RN: Registered Nurse
- Pharm: Pharmacist *

*Pharmacists must work in an outpatient setting in a Health Professional Shortage Area.

Approved Primary Care Specialties for Physicians:

- Family Medicine (and osteopathic general practice)
- Internal Medicine
- Pediatrics
- Obstetrics/Gynecology
- Geriatrics
- Psychiatry

Approved Primary Care Specialties for Nurse Practitioners and Physician Assistants:

- Adult
- Family
- Pediatrics
- Psychiatry/mental health
- Geriatrics

• Women's Health

What makes an application complete?

Your application must include:

- Online application.
- Required supporting documents.

Individuals applying to the HPLRP must submit an online application and the required supporting documents by **February 28, 2025**. Supporting documents need to be delivered or postmarked by **February 28, 2025**.

Please mail all supporting documents to:

ATTN: Rebeca Vasquez / Manuel Ortiz Office of Primary Care & Rural Health Rhode Island Department of Health 3 Capitol Hill, Room 410 Providence, RI 02908

Alternatively, supporting documents can be delivered to the RI Department of Health. In the main foyer, there is a drop box labeled "RI Health Professional Loan Repayment Program." We kindly ask that you please follow up with an email to notify us that your documents have been delivered to the drop box.

Application Requirements

The following provides an overview of the application requirements and the sections you will need to complete when submitting your application.

I. Applicant Information

In this section, you will be asked to provide contact information such as your name, mailing, and email address, as well as information about your racial/ethnic background.

II. Eligibility

In this section, you will be asked whether you are willing to commit to a service obligation with the HPLRP. Additionally, you will be asked whether you have a service commitment that prevents you from enrolling in the HPLRP. If you do not pass this screening portion of the application, you cannot continue with the application.

III. Service Requirement

In this section, you will be asked to select a service track: "Full-Time Service" or "Part-Time Service." Your service track is based on the hours you work per week and the time you devote to direct patient care. Please reference the <u>eligibility requirements</u> when determining your service track.

IV. Health Professional Information

In this section, you will be asked to provide information about your education, training, licensure, and certifications.

V. Language

In this section, you will be asked to indicate which language(s) you speak, in addition to English, with sufficient fluency to provide adequate healthcare.

VI. Primary Practice Site Information

In this section, you will be asked to provide information about your employer and site(s) where you currently provide patient care.

VII. Required Short Answer Questions

In this section, you will have an opportunity to allow us to learn more about you by responding to a set of four short answer questions.

VIII. Student Loan Balance

In this section, you will provide information on each qualifying educational loan for which you seek repayment. Please see the HPLRP Eligibility and Requirement for more information on qualifying and non-qualifying educational loans.

We will review supporting documents, contact your student loan vendor(s), and check your credit report if you are selected for an award.

For each student loan account, you must provide:

- Name and contact information for the vendor/holder.
- Loan account number.
- Current outstanding balance (no more than 30 days from the date you submit your application).
- Mailing address where your current student loan vendor/holder accepts payment

Additionally, as part of the supporting documents, you will be asked to provide us with a statement from your student loan vendor detailing your educational student loan account(s).

IX. Required Supporting Documents

An application is incomplete without the following required supplemental documents. It's your responsibility to ensure that all required supporting documents are submitted by the application deadline.

Required supporting documents from the health professional:

- Copy of the health professional's current resume or curriculum vitae (maximum of 5 pages)
- Copy of the health professional's current Rhode Island professional license
- Proof of US citizenship (provide a copy of passport or birth certificate)
- Health professional's qualifying loan statement(s)
 - Please provide a student loan balance and account information from your lenders

- W-9 (Verification of Taxation Reporting Information) Download at <u>https://www.irs.gov/pub/irs-pdf/fw9.pdf</u>
- Paystub from your practice site(s)
 - Please submit a copy of your paystub from the month prior to, or the month of, the application deadline
- Credit Authorization and Privacy Disclosure Form
- If applicable:
 - Documentation of certification by the International Certification and Reciprocity Consortium (C and RC) or the Association for Addiction Professionals (NAADAC) to provide substance abuse services

Requirements for employer/ practice site:

- If your employer is not listed in the <u>HPLRP Approved Site list</u>, they will need to complete the <u>Rhode Island HPLRP Site Application</u> to determine if your practice site is eligible to participate in the program.
 - There are a few supporting documents that health facilities seeking to host HPLRP participants need to submit as part of their application. Please direct the administrator of your practice to the RI HPLRP page for more details about site requirements; alternatively, they can contact the Office of Primary Care and Rural Health with questions.
- If your employer is listed in the <u>HPLRP Approved Site</u>, your site administrator will need to complete the following:
 - Payor Mix Information Form
 - Employer Eligibility Attestation
 - Letter of confirmation of employment

For convenience, the forms listed above and instructions are included in the <u>checklist and</u> <u>supporting</u> documents packet provided as part of this application.

Ineligible Sites:

HPLRP applicants must work in an outpatient setting that is located in a Health Professional Shortage Area. Sites must also offer a Sliding Fee Discount Program to minimize financial barriers to care for patients at or below 200 percent of the current Federal Poverty Guidelines. The list below is intended to provide examples of sites and setting that are NOT eligible for the HPLRP based on the federal requirements of the program.

- Inpatient hospitals
- Clinics that limit care to veterans and active-duty military personnel
 - Veterans Health Administration medical centers, hospitals and clinics,
 - Clinics located on military installations
 - Civilian health care providers in the TRICARE Network
- Residential facilities
- Other types of inpatient facilities and inpatient rehabilitation programs
- Local/ county/city/ private correctional facilities
- Home-based health care settings of patients or clinicians
- Specialty clinics and/or service specific sites limited by gender identity, organ system, illness, categorical population or service
 - e.g., clinics that only provide sexually transmitted diseases/human immunodeficiency virus/tuberculosis services

FOR EMPLOYER FORMS, PLEASE SUBMIT ORIGINALS WITH SIGNATURES

Can I upload the required supporting documents to my online application?

Yes, you may upload the health professional's required supporting documents with your application and the employer/practice site supporting documents, or they may be mailed to the Office of Primary Care and Rural Health by the application deadline. It's your responsibility to ensure that your employer forms are submitted before the application deadline

The required forms and supporting documents for your employer/ practice site can be downloaded <u>here</u>. A representative from human resources or an administrator must complete this section on your behalf. Please submit original forms with signatures to the Office of Primary Care and Rural Health.

Can I save and return to my work later?

Yes. The Save & Return Later button on each survey page allows applicants to save their progress and return at a future time to where they left off to complete the survey. When the respondent clicks this button, they will be given a validation code, which they will be required to enter to resume the survey.

When an applicant clicks the Save & Return button, a screen displaying a random validation code is displayed, similar to the following image:

Validation code needed to return	×
Copy or write down the validation code below. Without return and continue this survey. Once you have the cod the other instructions on this page.	
Validation code: nabt93hj	
	Close

Applicants **must remember this validation code** because they will be prompted to enter it later when they try to resume the survey.

When the respondent clicks *Close* in the above screen, the subsequent screen will display that same validation code, as a reminder. That screen will also allow applicants to request that REDCap send them an email, which will contain the web link to use for resuming the survey.

What happens if I start an application but am having difficulty returning to my work?

Applicants who have their validation code can still resume their work again by revisiting the application link. In the upper right corner of the first survey page, please click the *Returning?* link and you will then be prompted to enter the validation code for re-entry into their survey. All previously entered answers will be intact.

If you accidentally misplaced, your validation code, please contact Rebeca Vasquez at <u>Rebeca.Vasquez@health.ri.gov</u> or Manuel Ortiz at <u>manuel.ortiz@health.ri.gov</u> for additional assistance.

What steps are being taken to secure my information?

The RI Health Professional Loan Repayment Program uses REDCap as the backbone for its electronic application. REDCap is a secure, web application designed to support data capture for a wide range of research studies. It includes features for HIPAA compliance including real-time data entry validation (e.g. for data types and range checks), a full audit trail, user-based privileges, and de-identified data export mechanism to statistical packages (SPSS, SAS, Stata, and R). Access to applicant data in REDCap will be restricted to members of the Office of Primary Care and Rural Health.

What happens after I submit my application?

You will be able to download a copy of your online application for your records. The office of Primary Care and Rural Health will review applications after the deadline. We will evaluate all submissions for completeness and program eligibility. Individuals with incomplete applications or who are ineligible for the program will be notified. The RI HLPRP Board will meet to discuss all eligible applications and determine awards. Depending on when the Board meets, you will be notified via email if you were selected for an HPLRP award at the end of the summer (late August).